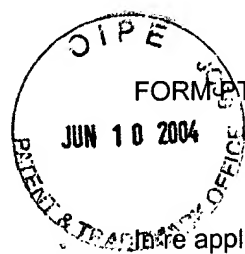


165/15



FORM PTO-1083

355863.00120

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Randy ZIEGLER

Serial No: 09/967,030

Filed: 09/27/2001

For: COMPOSITIONS AND METHOD OF TREATMENT FOR DIABETES

Art Unit: 1651

Examiner: Patricia A. PATTEN

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
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June 7, 2004

Date of Deposit
Heather B. Centurioni

Name *Heather B. Centurioni* 06/07/04
Signature Date

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small entity status has been claimed. See 37 CFR § 1.27.
☐ A certified copy of ___ Patent Application No. ___ filed ___ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
☒ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.
☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	1	-	17**	0	LG=\$18 SM=\$9	\$9	\$ 0
INDEPENDENT CLAIMS FEE	1	-	10***	0	LG=\$84 SM=\$42	\$42	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140		\$ 0
TOTAL							\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Request for Extension of Time (2 months)
☐ A check in the amount of \$___ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-2567, referencing docket number 355863.00120. **A copy of this sheet is enclosed.**
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
REED SMITH LLP

Date: June 7, 2004

By: *Stefan J. Kirchanski*
Stefan J. Kirchanski
Registration No. 36,568
Attorney for Applicant(s)

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Fax: (310) 734-5299



PATENT

Docket No. 355863.00120
(Former Docket No. 25863.00120)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

ZIEGLER, Randy H.

Serial No: 09/967,030

Filed: 09/27/2001

For: COMPOSITIONS AND METHOD OF
TREATMENT FOR DIABETES

Art Unit: 1651

Examiner: Patricia A. Patten

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7-June-2004

Date of Deposit

Heather Centurioni

Name

Signature

AMENDMENT

Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

In response to the Office Action dated January 5, 2004, the date for
response having been extended from April 5, 2004 to June 17, 2004 by the
enclosed petition and fee authorization, please amend the above-identified
application as follows:

Claim amendments begin on Page 2 of this document.

Remarks begin on Page 3 of this document.